

SERIAL NUMBER 09/363,311	FILING DATE 07/28/99	CLASS 359	GROUP ART UNIT 2872	ATTORNEY DOCKET NO. 5201-16300/P
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APPLICANT	DANIEL WATKINS; SARATOGA, CA.
	<p>**CONTINUING DOMESTIC DATA*****</p> <p>VERIFIED</p> <p>_____</p> <p>**371 (NAT'L STAGE) DATA*****</p> <p>VERIFIED</p> <p>_____</p>
	<p>**FOREIGN APPLICATIONS*****</p> <p>VERIFIED</p> <p>_____</p>
	IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/19/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>MCB</u> Examiner's Initials		<u>MCB</u> Initials			

ADDRESS	JONATHAN M HARRIS CONLEY ROSE AND TAYON PC SUITE 1800 CHASE TOWER 600 TRAVIS HOUSTON TX 77002

TITLE	FUNCTIONAL-PATTERN MANAGEMENT SYSTEM FOR DEVICE VERIFICATION

FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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CONFIRMATION NO. 7985

Bib Data Sheet

SERIAL NUMBER 09/363,311	FILING DATE 07/28/1999 RULE	CLASS 702	GROUP ART UNIT 2857	ATTORNEY DOCKET NO. 5201-16300/P
APPLICANTS DANIEL WATKINS, SARATOGA, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/19/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>W. J. [Signature]</i> MCB Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 20
		INDEPENDENT CLAIMS 3		
ADDRESS 24319 LSI LOGIC CORPORATION 1621 BARBER LANE MS: D-106 LEGAL MILPITAS, CA 95035				
TITLE FUNCTIONAL-PATTERN MANAGEMENT SYSTEM FOR DEVICE VERIFICATION				
FILING FEE RECEIVED 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)	